



Commonwealth
of Massachusetts

Center for Health
Information and Analysis

All Payer Claims Database Data Volume Reports

2008 - 2012

March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: CHIA-APCD@state.ma.us.

Thank you for your interest in the All Payer Claims Database.

Commonwealth of Massachusetts-Center for Health Information and Analysis (CHIA)
APCD Data Volume Reports 2008-2012 (based on data received by 12/19/2012)

Aetna Life Insurance Company - Medicare														
File Type*	Submission Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
PR	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
PR	2012	0	0	0	0	0	0	0	0	0	0	0		0
ME	2009	0	0	0	0	0	0	0	0	0	0	0	11,055	11055
ME	2010	0	0	0	0	0	0	0	0	0	0	0	15,060	15060
ME	2011	23,431	23,398	23,350	23,304	23,290	23,280	23,302	23,388	23,458	23,524	23,591	19,893	277,209
ME	2012	29,784	29,862	29,915	30,063	30,123	30,234	30,382	30,504	30,614	30,750	30,802		333,033
PV	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
PV	2012	0	0	0	0	0	0	0	0	0	0	0		0
MC	2008	1,007	4,599	4,928	6,447	6,987	6,923	7,245	7,236	7,073	7,835	7,400	7,817	75,497
MC	2009	7,149	7,890	9,076	8,832	8,096	8,336	8,679	13,868	8,588	8,752	8,350	8,698	106,314
MC	2010	5,094	7,161	12,331	10,136	10,688	10,101	9,630	9,612	9,370	9,840	16,174	11,187	121,324
MC	2011	7,786	8,962	12,927	10,967	10,723	11,437	8,832	11,236	9,902	10,440	10,679	11,642	125,533
MC	2012	9,580	8,172	13,404	11,531	12,650	10,570	10,910	11,731	10,051	12,847	11,842		123,288
PC	2008	22,128	22,146	23,596	24,174	25,684	25,005	26,644	26,163	27,554	29,184	27,356	29,220	308,854
PC	2009	12,239	11,794	13,270	13,474	13,882	14,929	14,978	14,869	14,746	15,707	15,179	15,975	171,042
PC	2010	38,835	39,690	46,906	46,154	49,438	48,328	50,019	56,005	49,411	60,867	46,457	46,783	578,893
PC	2011	40,684	37,271	42,668	38,568	39,970	39,386	38,338	40,589	39,091	40,415	40,466	42,485	479,931
PC	2012	50,871	48,646	53,360	52,035	71,181	58,273	55,870	56,457	50,223	55,953	54,267		607,136
DC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2012	0	0	0	0	0	0	0	0	0	0	0		0

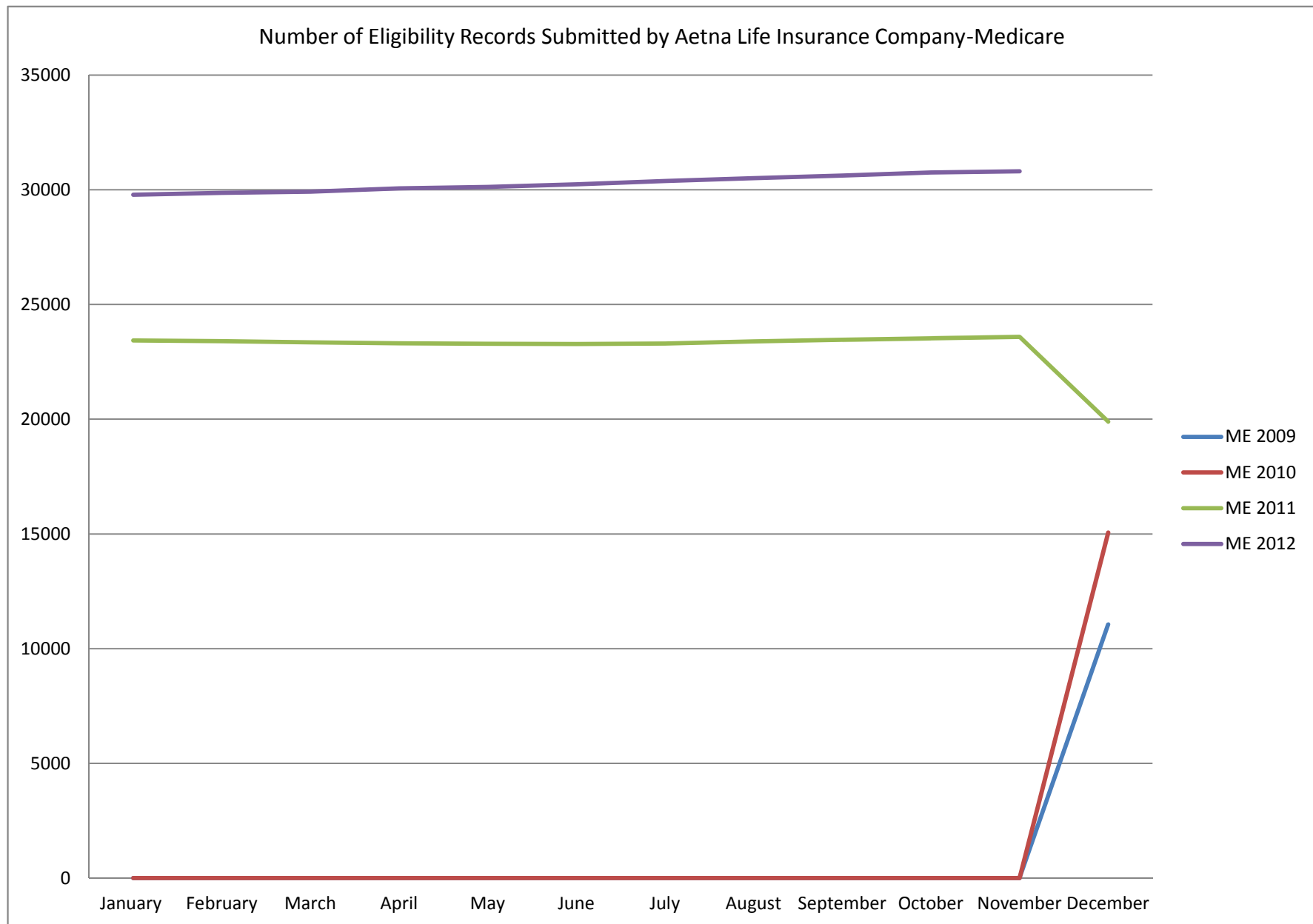
***Key:** PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

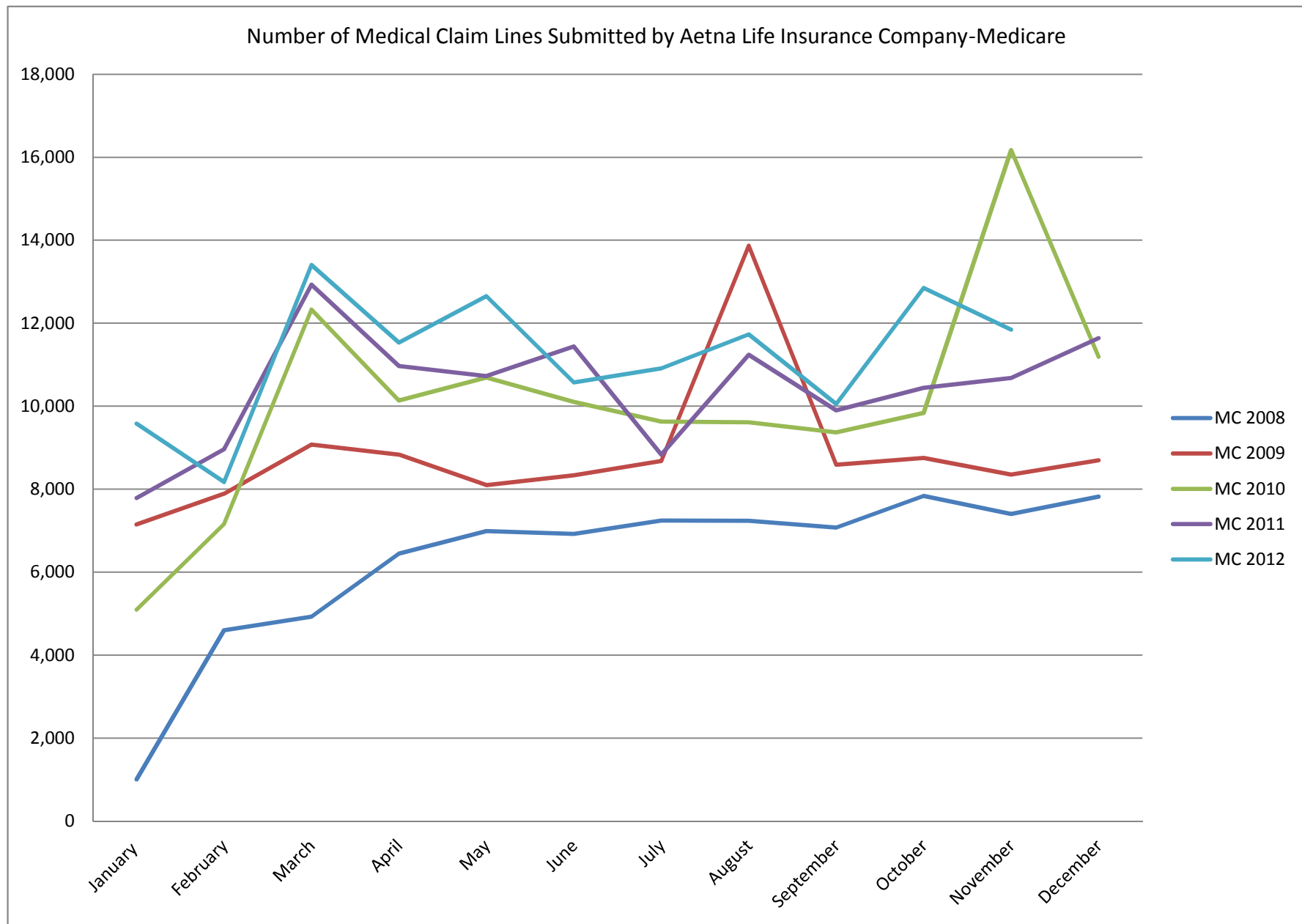
The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:

- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.

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